EXHIBIT 11



Dart Transit Company				_
800 Lone Oak Road, Eagan, MN 55121 • Mailing Address: P.O. Box 64110, St. Paul, MN 55164-0110 • Office: 651-688-2000 •		000		
To: Florida Transformer				
Re: Edward Thompson Social Security 417-88-	9.3/	2		
He/ She is an Owner/ Operator Company Driver	17			
Dates of Service: From 4/26/04 To Present Additional Dates To			2	
Position: Driver, Tractor Trailer Hauling: General Commodities Pulling: 53 foot Dry Van Trailer State Authority: 48 plus Canada	٠			
Reason for separation:				
☐ Voluntary Quit ☐ Discharged ☐ Currently Empl	oyed			
ACCIDENT / INCIDENT INFORMATION				
ACCIDENT/INCIDENT INFORMATION				
DATE PREV/NP DESCRIPTION	F		DOT RDAE	BLE
6/14/04 NP #1 Struck #2 in near.			es	
			-	
Eligible for rehire: Upon Review				
ad a test with a confirmed breathe alcohol level of 0.04 or greater in the past 3 years?	YES		NO	×
ested positive for a controlled substance in the last 3 yrs?	YES		NO	×
Refused a controlled substance test and/or alcohol test in the past 3 years?	YES		NO	Q
iolated other DOT drug/alcohol regulations in the past 3 years?	YES		NO	X
eceived information from a previous employer that this individual violated DOT drug alcohol regulations in the past three (3) years?	YES		NO	政
as the above listed individual been subject to federal drug & alcohol testing		_/		
quirements in the past three (3) years?	YES	X	NO	Ц
Completed by Mianne qualifications Date Completed: 9/	7/04			